DATENT	APPLICATION F	FF DETERMINA	TION RECORD
PAIENT	APPLICATION	CC OCIENINA	HION NECOND

Effective October 1, 2003

Application or Docket Number

10728349.

CLAIMS AS FILED - PART I (Column 1) (Column 2					mn 2)		SMALL ENTITY TYPE			OTHER THAN R SMALL ENTITY		
TOTAL CLAIMS			11					RATE	FEE	]	RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FEE	385.00	OR	BASIC FEE	770.00
TOTAL CHARGEABLE CLAIMS			)/ minus 20=		•			XS 9=		OR	X\$18=	
INDEPENDENT CLAIMS			.द minus 3 =		*			X43=		OR	X86≈	
MULTIPLE DEPENDENT CLAIM PRES			IESENT								.000	
* If the difference in column 1 is less than zero, enter "0" in column 2							L	+145=		OR	+290=	
Trand CLAIMS AS AMENDED - PART II								TOTAL SMALL I	ENTITY	OR OR	OTHER SMALL	
_	J 10 5	(Column 1)	1	HIGH		(Column 3)	1 -			. 1		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUME PREVIO	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
MO	Total	. //	Minus	*	20	- 0		X\$ 9=	1	OR	X\$18=	
ME	Independent	. 3	Minus	***	3		lt	X43=		<b>OR</b>	X86=	
	FIRST PRESE	NTATION OF MI	JLTIPLE DEF	PENDENT	CLAIM	U_	┚╏	÷145=			+290=	
										OR		
								TOTAL ADDIT. FEE				
	_	(0-1 4)		(0.1	0\	(Oak	. ^	DU11. FEC 1			ADDII. 1 EE1	
		(Column 1)  I CLAIMS	ı	(Colun		(Column 3)	1 -				<u> </u>	
18		REMAINING AFTER		NUME	BER	PRESENT EXTRA		RATE	ADDI- TIONAL		RATE	ADDI- TIONAL
EN		AMENDMENT		PAID	-		1 L		FEE			FEE
AMENDMENT B	Total	*	Minuś	**		=		X\$ 9=		OR	X\$18=	
AME	Independent	*	Minus	***	O: 4194		ļΓ	X43=		OR	X86=	
لــا	FIRST PRESE	NTATION OF MU	ILITE UEF	ENDEN	CLAIM		¹ ऻ	+145=		OR	+290=	
						L	TOTAL		1	TOTAL	•	
·								DDIT. FEE		OR	ADDIT. FEE	
		(Column 1)		(Colun	nn 2)	(Column 3)						
AMENDMENT C	`	CLAIMS REMAINING	·	HIGHI NUME	EST BER	PRESENT	Г		ADDI-			ADDI-
		AFTER AMENDMENT		PREVIO PAID I		EXTRA	I L	RATE	TIONAL FEE		RATE	TIONAL FEE
	Total	*	Minus	**		=	ļΓ	X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***,		=		X43=		OR	X86=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM									- :	ΩÜ		
* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.												
<b>~</b> }	the "Highest Nur	mber Previously Pa	id For IN THIS	S SPACE is	less tha	n 20, enter "20."	- AI	TOTAL ODIT. FEE		OR	TOTAL ADDIT. FEE	
***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.												